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WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 8003

SERIAL NUMBER 09/842,458	FILING DATE 04/26/2001 RULE	CLASS 604	GROUP ART UNIT 3762	ATTORNEY DOCKET NO. STD 00.02
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**APPLICANTS**

Steven J. Tallarida, Mansfield, MA;  
Mark Ettlinger, Lexington, MA;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLN CLAIMS BENEFIT OF 60/199,714 04/26/2000 *SS*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\****None***IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*****\*\* 06/18/2001**

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 12	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

HAYES, SOLOWAY, HENNESSEY,  
GROSSMAN & HAGE, P.C.  
130 W. Cushing Street  
Tucson, AZ 85701

**TITLE**

Implantable hemodialysis access device

FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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